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SECRETARY OF STATE
TALLAHASSEE, FIRE

COVER LETTER

	Registration S Division of Co				
SURJEC	$\sim_{\mathbf{r}}$. The N	orrison Law F	irm, LLC		
Name of Limited Liability Company					
The smal	anad Antinton at	Consideration and factor	and anisted different Affilians		
		Organization and fee(s) are	Ü		
Please re	turn all corresp	ondence concerning this mat	ter to the following:		
5	Sarah M	orrison			
			Name of Person		
-	The Mor	rison Law Firm	, LLC		
•			Firm/Company		
4	4080 Bo	thwell Terrace			
_			Address		
Ta	allahassee	, FL 32317			
City/State and Zip Code					
<u>m</u>	orrisonlav	/llc@gmail.com			
			or future annual report notification)		
For furth	er information of	oncerning this matter, please	e call:		
Sarah Morrison			at (228) 324-305	1	
	Name o	f Person	Area Code & Daytime Tele	phone Number	
Enclosed	d is a check fo	the following amount:			
	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION

OF

THE MORRISON LAW FIRM, LLC

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company act, hereby establishes the following:

ARTICLE I:

The name of the limited liability company shall be THE MORRISON LAW FIRM, LLC.

ARTICLE II:

The mailing address and the street address of the principal office of the limited liability company shall be

4080 Bothwell Terr.

Tallahassee, FL 32317

ARTICLE III:

The Registered Agent and the street address of the initial Registered Office of the limited liability company in the State of Florida, whose Consent to Appointment as Registered Agent is hereto attached, shall be:

Sarah Morrison, Esq.

Morrison Law Firm, LLC

4080 Bothwell Terr.

Tallahassee, FL 32317

ARTICLE IV:

The name and address of the Managing Member is:

Sarah Morrison, MGRM.

c/o Morrison Law Firm, LLC

4080 Bothwell Terr.

Tallahassee, FL 32317



ARTICLE V:

This Limited Liability Company is established for and authorized to conduct all business legal in the state and elsewhere. The effective date is October 20, 2011.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization in accordance with section 608.408(3), Florida Statutes, the executing the Affidavit above affirms under penalties of perjury the facts stated herein are true.

Sarah Morrison, Esq.

October 20, 2011

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECIOTN 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

The Morrison Law Firm, LLC

2. The name and street address of the registered agent are

Sarah Morrison, Esq. c/o Morrison Law Firm, LLC 4080 Bothwell Terr. Tallahassee, FL 32317

ACKNOWLEDGEMENT:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Sarah Morrison, Esq.

Registered Agent October 20, 2011